FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)			Office use only
NAME OF COMMITTEE (in	full) (Check if is change		f typying, type les 12	PFE4M5
DONNA EDWARDS FOR CONGRESS				
ADDRESS (number and	street) 8904 Glen La	ne		
(Check if addr is changed)	ess Fort Washing	şton		MD 20744 _
COMMITTEE C E MAA	II ADDDECC	CITY▲	STA	TE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRESS info@donnaedwardsforcongress.com				
		<u> </u>	111 111	
COMMITTEE'S WEB PAGE ADDRESS (URL)				
donnaedwardsforcongress.com				
			1 1 1 1 1 1	
COMMITTEE'S FAX NUMBER				
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2. DATE M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFICATION NUMBER C C00422964				
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete				
Type or Print Name of	Treasurer Valerie E	rvin		
Signature of Treasurer	Electronically Filed by Va	lerie Ervin	Date	$ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ & 1 & 6 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ & 2 & 0 & 0 & 6 \end{smallmatrix}] $
NOTE: Submission of fa	·	nation may subject the pers		to the penalties of 2 U.S.C. S437g. IN 10 DAYS
Office Use Only		Feder Toll F	urther information contaction and Election Commission ree 800-424-9530	FEC FORM 1 (Revised 02/2003)